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Date

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. H0004743-1246

First Inventor Robert J. Saccomanno

Title Homogenizer for Collimated Light with Controlled High Angle Scatter

(Only for new nonprovisional applications under 37 CFR 1.53(b)) EU864344031US Express Mail Label No. Mail Stop Patent Application **APPLICATION ELEMENTS** Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🗹 Specification [Total Pages_ Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: b. - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention Paper - Brief Summary of the Invention - Brief Description of the Drawings (if filed) Statements verifying identity of above copies - Detailed Description ACCOMPANYING APPLICATION PARTS - Claim(s) - Abstract of the Disclosure 9. Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets Power of 37 CFR 3.73(b) Statement (when there is an assignee) Attorney 5. Oath or Declaration Total Sheets English Translation Document (if applicable) 11 a. Newly executed (original or copy) Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations Copy from a prior application (37 CFR 1.63(d)) 13 **Preliminary Amendment** (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) (Should be specifically itemized) DELETION OF INVENTOR(S) Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR 16. Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 6. 🔽 Application Data Sheet. See 37 CFR 1.76 17. 🔲 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: Prior application information: Examiner Art Unit:

Art Unit:

Art Unit:

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only; the entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS **Customer Number:** 000128 Correspondence address below Name Kurt A. Luther / James W. Falk Honeywell International Inc., Law Dep. AB2 Address P. O. Box 2245 City State Zip Code Morristown New Jersey 07962-2245 Telephone 201-393-2065 Country USA 201-393-6564 Name (Print/Type) James VV. Falk Registration No. (Attorney/Agent) 16,154

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/17 (10-03)
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

101	inla
(\$)	2,50

spond to a collection of information unless it displays a valid OMB control number					
Complete if Known					
Application Number	New Application				
Filing Date					
First Named Inventor	Robert J. Saccomanno				
Examiner Name	Not Yet Assigned				
Art Unit	Not Yet Assigned				
Attorney Docket No	H0004743-1246				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)				
Check Credit card Money Other None		3. A	3. ADDITIONAL FEES				
Deposit Account:		Large	Large Entity Small Entity				
Deposit		Fee Code	Fee (\$)	Fee Code	Fee	Fee Description	
Account Number	01-1125	1051	***	2051		Surcharge - late filing fee or oath	Fee Paid
Deposit Account	Honeywell International Inc.	1052		2052	25	Surcharge - late provisional filing fee or	
Name		4050				cover sheet	
	is authorized to: (check all that apply)	1053	130 2.520	1053 1812		Non-English specification For filing a request for ex parte reexamination	
I —	e(s) indicated below	1804	920*	1804		Requesting publication of SIR prior to	——
	ny additional fee(s) or any underpayment of fee(s)	100#	920	1004	920	Examiner action	
<u> </u>	e(s) indicated below, except for the filing fee dentified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC F	ILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity	Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Code (\$)	Fee Fee Fee Description Fee Paid Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770	2001 385 Utiliby filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170 Design filing fee 770.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160	2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
;	SUBTOTAL (1) (\$) 770.00	1452	110	2452	55	Petition to revive - unavoidable	
2 EYTDA	CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional	
Z. LXTRA	Fee from	1501	1,330	2501	665	Utility issue fee (or reissue)	
Total Claims	Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Independent	3 -3" = 0 x	1503	640	2503	320	Plant issue fee	
Claims Multiple Depe		1460	130	1460	130	Petitions to the Commissioner	
Large Entity	Small Entity	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Fee Fee	Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)	Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	80.00
1202 18	2202 9 Claims in excess of 20	1809	770	2809		Filing a submission after final rejection	
1201 86	2201 43 Independent daims in excess of 3					(37 ČFR 1.129(a))	
1203 290	2203 145 Multiple dependent claim, if not paid	1810	770	2810		For each additional invention to be examined (37 CFR 1.129(b))	
1204 86	2204 43 ** Reissue independent daims over original patent	1801	770	2801		Request for Continued Examination (RCE)	
1205 18	2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
Other for (specific)							
SUBTOTAL (2) (3)							
**or number previously paid, if greater; For Reissues, see above SUBTOTAL (3) (\$) 80.00							

SUBMITTED BY			(Complet	e (if applicable))
Name (Print/Type)	James W Falk	Registration No. (Attorney/Agent) 16,15	4 Telephon	e 201-393-2065
Signature	I A FOI		Date	Jan 5 12+04

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